

## Upcoming Events

Michigan Victims Assistance Academy Advanced Training:  
Responding to Juvenile Victims and Offenders  
September 19, 2001 – September 21, 2001  
Kellogg Biological Station on Gull Lake, MI  
Registration Fee: \$25  
Contact: Sally Amos (517) 432-3156;  
(517) 432-0727 (fax)  
E-mail: amoss@ssc.msu.edu

Prosecuting Attorneys Association of Michigan  
& The Crime Victim Services Commission:  
*Co-Victims of Homicide*  
September 25, 2001 – September 27, 2001  
Contact Terri Young for details (517) 334-6060

Joint Conference of State Compensation  
& VOCA Assistance Programs  
Renaissance Hotel, Washington, DC  
October 6, 2001 – October 10, 2001  
Contact: Dan Eddy, NACVCB (703) 313-9500

VOCA Grant Award Workshops 2001-2002  
(Mandatory for Project Director & Financial Officer)  
October 17 or October 24, 2001 (choice of 2 sessions)  
10:00 a.m. – 5 :00 p.m.  
Library of Michigan Auditorium  
717 W. Allegan Street, Lansing, MI  
Registration details will be included in award packet

Prosecuting Attorneys Association of Michigan  
& The Crime Victim Services Commission:  
*Basic Training for Victim Advocates*  
November 7, 2001 – November 9, 2001  
Contact Terri Young for details (517) 334-6060

Michigan CVSC/VOCA Council of Advocates  
Autumn 2001 in Lansing (details TBA)  
Contact: Kim Lamphere, MPH (517) 324-8358



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Data Systems, Evaluation, and Training  
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Okemos, MI 48864



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Summer 2001

## SEASONAL ADJUSTMENTS

■ *By Michael J. Fullwood, Director, Michigan Crime Victim Services Commission*

As I sit here doing system testing at my computer, it's hard to believe that our Michigan summer is almost over. Just as you really get into the rhythm of it, it's gone. As the shadows lengthen at this time of year, I inevitably recall the ambitious lists of activities and chores that I created for myself in March.

The semi-annual publication of the Michigan Advocate provides a similar opportunity to reflect and assess. The last time we were printing this newsletter, some of our biggest concerns were, "Would the new SIGMA on-line grant application really work? Could we get the testing done in time? Or, worst-case scenario, would we crash and burn?"

Well, it did work. The testing uncovered all but a few glitches that were resolved during the submittal phase. And, thankfully, no flames were reported. We are now in the process of installing and testing the on-line reporting functions, and frankly, I sometimes catch myself pondering the same cautionary thoughts. (Note to self: Must stay positive!)

We continue to be in debt to the agencies that use this system for the excellent feedback and suggestions we receive, and I am pleased to report that SIGMA-derived systems appear to be in the works for the Michigan Department of Education and the Family Independence Agency.

My thanks to our gracious contributors and to the MPH staff for again creating a diverse and thought-provoking reading experience. If you haven't yet had as much time and opportunity as you would like, try to get to know more of your fellow victim service providers in various specialties of practice from around Michigan. They're very good people!

Well, now that I'm seasonally adjusted, I have to get back to testing. Hmmm, ...must automate trainings...must get prosecutor grants on-line...must study compensation claim potential...must do away with written signatures...must eliminate all need for paper everywhere....

(Note to self: Must stay focused!)

Have a great autumn and winter!

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# TECHNOLOGY HELPS TRACK CRISIS CALLS

By Valerie Helgren

Like most other agencies that respond to crisis calls, the Center for Women in Transition struggled to develop a comprehensive crisis information network. Providing information to office staff concerning overnight crisis situations and even those of previous days or weeks was sometimes a daunting and difficult task. As the person responsible for coordinating our crisis services, I was frequently frustrated with my inability to provide crucial information to all necessary staff in a timely fashion. Many mornings I was literally going from office to office throughout the building to relay information about an expected crisis call. Keeping an accurate record of the number and type of calls received for our statistical purposes was time consuming and placed an additional burden on our already overworked staff.

### Developing the Crisis Call Manager

I envisioned using technology to create a crisis response system that would provide the necessary information to all appropriate staff quickly and easily. By collaborating with our newly hired systems administrator, we created the Crisis Call Manager (CCM). The systems administrator designed the system to be user-friendly even during hectic crisis-call shifts. Using the CCM, crisis-call workers quickly and easily enter information for each call received and almost instantly access other crisis contacts we have had with the same caller.

The CCM uses Microsoft® Access 2000 for its user interface and Microsoft® SQL Server for its data storage. The data is stored on a network server and can be accessed at multiple workstations simultaneously. The program requires user authentication before any call records can be viewed. This ensures security and confidentiality. It has several screens of call information, including a comment field, crisis plan, shelter denial information, statistical entry and follow-up information.

The follow-up field is particularly useful for alerting staff to situations that require action. When beginning a shift, crisis workers open the CCM, click on the follow-up field and can immediately view situations needing further attention. Information about when and where the follow-up call should take place, a client phone number, and whether a particular staff person needs to respond are displayed on-screen. Information about previous calls, listed by date, are easily reviewed or edited. The 30 most recent calls are listed on-screen. The rest are stored in the data tables. Crisis workers can also search these data tables.

### Generating Reports and Supervisory Review

With a click of the mouse, we can generate reports from the information collected from each call. These reports can include: 1) how the client heard about our agency; 2) calls by program type; 3) calls by county; 4) shelter denials; 5) average follow-up response time; and 6) monthly trends. New reports are fairly easy to generate as additional information becomes available.

Reports may be generated in pie, line or bar graph formats. They are not only very informative, but impressive-looking as well!

As part of an ongoing effort to improve the services to crisis callers, the agency has also adopted a policy of supervisory review for each call received. The CCM has a supervisory review screen to help facilitate this process. It gives an overview of each call, records the reviewer’s initials, and the date of review. The review screen helps us handle crisis calls in a more consistent manner and follow correct procedures for each call.

The CCM gives our agency the security in knowing that when clients call us, they don’t have to repeat their stories over and over. They can “pick up where they left off.” The CCM further helps gather consistent statistical information and accurately reflects the agency’s crisis response to victims of crime. Overall, the CCM helps us provide improved services to our clients, and after all, that’s what we’re here for!

Valerie Helgren is the Volunteer Services Coordinator at the Center for Women in Transition in Holland, Michigan.

### Questions regarding CVSC Programs may be directed to the Program Specialist:

Crime Victims Assistance/VOCA Grants:  
Leslie O'Reilly (517) 373-1826

Crime Victims Compensation Claims/Restitution Coordination:  
Marian Smith (517) 373-0594 or Janine Washburn (517) 373-3640

Crime Victims Rights/Victim Notification:  
Beth Adcock (517) 373-1902



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# ADVANTAGES OF COLPOSCOPY IN SEXUAL ASSAULT EXAMINATIONS

By Linda Rossman

Often, the key in the successful prosecution of a sexual assault case may hinge upon the detection of physical evidence. While physical trauma from sexual assault requiring immediate medical attention is usually visible by ordinary eyesight, such injuries only occur in a small number of victims (Tintinalli & Hoelzer, 1985). However, physical findings that are subtle or are not clearly visible may also provide evidence for legal prosecution. It has been shown that the rate of successful prosecutions is significantly higher when trauma and other physical findings (semen, hair, etc.) are documented (Rambow, Adkinson & Frost, 1992).

A colposcope can be used in sexual assault examinations to inspect for injury. It is an instrument that uses binocular magnification and some have photographic capabilities. Currently, the use of the colposcope is generally considered a standard of care in the evaluation of pediatric sexual assault victims. Only relatively recently have investigators examined the use of the colposcope as an aid in the detection of genital trauma in adult victims of sexual assault. A 1998 study documented trauma in 53% of adult sexual assault victims using colposcope examination compared to 6% using ordinary eyesight (Lenahan, et al., 1998).

My colleagues and I recently conducted a study regarding the documentation of genital trauma in women evaluated for sexual assault. We compared the documentation of a hospital emergency department (ED) to that of a nurse examiner program (NEP) in a freestanding clinic designed to provide comprehensive care to sexual assault victims. The study consisted of a retrospective chart review of consecutive female sexual assault patients referred to either the ED of a university-affiliated hospital or to the NEP. The study period was from January 1995 through November 1998.

All patients were 12 years of age or older and were reviewed chronologically for potential inclusion in this study. Charts were excluded if the victim: 1) was examined for treatment more than 72 hours after the assault; 2) documentation indicated no completed vaginal penetration by a penis; 3) a police report was not filed; or 4) the women declined to undergo a forensic examination or to allow the practitioner to collect an evidence kit.

Victims appearing in the ED were examined by a board-certified emergency medical physician and/or senior resident following standardized documentation procedures. A complete physical and genital examination was performed and injuries were recorded in both diagrams and in writing. None of the patients in the ED were evaluated using a colposcope.

In the NEP, the victim was examined by a registered nurse who had received specialized training in conducting forensic examinations, evidence collection, standardized documentation procedures and expert witness testimony. One element of the forensic exam here was a detailed genital examination using a colposcope and digital imaging system.

Data was abstracted for baseline demographics, assault history and documentation of genital and nongenital trauma using a standardized classification system. Colposcopic examination at the NEP was performed under 16x magnification. Photographs were taken of genital trauma using a digital imaging system. The two patient groups were compared statistically to see if there were significant differences between them. (Statistical analysis was done using Chi-square and unpaired t-tests, where appropriate, to determine significant differences between the two patient groups. P<0.05 was considered significant.)

Demographic results indicated the mean age of the patients was 24.5 (range 13 years to 93 years). Examination results found that there were no significant differences in the type and frequency of nongenital trauma between the two groups. However, genital injuries were documented in 74% of the patients evaluated in the NEP. In comparison, 19% of those patients examined in the ED had documented genital trauma. These differences were statistically significant. ( $\chi^2 = 79.5$ ,  $P < .0001$ )

This study concluded that women evaluated for sexual assault at the NEP had significantly more *documented* genital injuries when compared with victims seen in an ED. There was no difference in the type and frequency of nongenital trauma between the two groups. These results suggest that colposcopic examination improves detection of genital findings in female sexual assault victims when compared with detection by ordinary visual examination alone and may provide valuable medical and legal information.

### References

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3. Tintinalli, J. Hoelzer, M. Clinical findings and legal resolution in sexual assault. *Ann Emerg Med* 1985; 14: 5.
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Linda Rossman RNC, MSN, is the Coordinator of the YWCA Nurse Examiner Program in Grand Rapids, Michigan.

# INDIAN HEALING PRACTICES IN VICTIM SERVICES, PART 2

By Ruth Oja

[Editor’s Note: The first part of this two-part article was published in Winter 2001 edition of The Michigan Advocate.]

Regardless of the cultural group we may be addressing in victim services programs, advocates must be aware of the barriers that are developed unintentionally by services originally designed to meet the needs of individuals of a dominant or mainstream culture. If we are to be successful when working with individuals whose historical heritage differs from that of the dominant culture, it is our responsibility to be aware of those cultural differences. Here, my intent is to offer an opportunity for advocates to become acquainted with a few of the more common traditional healing techniques utilized within the Native American culture. I am hoping that as awareness increases regarding these techniques, we may begin the process of building bridges to better establish cross-cultural utilization of native healers residing on and off reservations in Michigan.

I am reminded of an old, well-used cliché: “There are many roads to the same destination, and the one that I am traveling may not be traveled by most!” The meaning behind this is indeed true of our diverse victim populations. As advocates, we are here to help victims of crime find and utilize their own unique avenues to peace after trauma.

When providing victim services to Indian people, there are a number of common techniques that can be utilized to help restore their sense of emotional or spiritual balance and to facilitate healing after traumatic events.

### Smudging

Smudging is utilized as a cleansing practice in which sage, cedar, sweetgrass or another appropriate healing plant is ignited, allowed to smolder, and offered to an individual for the purpose of creating an area of personal safety. A victim may cleanse a room or working space by circulating the smoke throughout the area. The smudging practice allows individuals to begin to take actions on their own behalf by ridding the self, or the working space, of negativity. It is a commonly held belief by the individuals we serve in Indian country that the practice of smudging is a physical part of the spiritual healing process. It is definitely not a symbolic gesture.

Victims have shared the following benefits by practicing the smudge techniques. First, participating in a smudging ceremony washes away thoughts, feelings or actions that may be weighing victims down and complicating the healing process. Second, individuals are given the opportunity to have a fresh start or gain a new sense of direction. Third, the process gives individuals a sense of relief; they feel freer to express themselves. Last, the process invites into the healing process positive, helping forces and this assures victims that they are not alone. Feeling less alone enhances victims’ ability to learn to let go of pain more easily.

### Talking Circle

The Talking Circle is the basic structure for any group healing activity, and spirituality is the foundation for this practice. Although the leader of the circle may have a specific agenda planned for circle participants, the group will generally flow by itself. Communication flow in the circle is established by the passing of a symbolic tool such as a feather, a rock, or a talking stick from one participant to another. The participants pass the object from person to person, as each individual is encouraged to share with the group. The use of an instrument allows each participant the opportunity to speak without interruption.

Victims who participate in a Talking Circle share some notable benefits. First, a Talking Circle helps an individual learn to break the effects of isolation, rebuild a sense of safety and develop a sense of companionship. Second, the Talking Circle helps restore a sense of importance and self-worth by allowing victims to speak without being interrupted by others; it helps build a sense of validation. Third, the practice helps to develop the feeling of being connected to old traditions once practiced by the victim’s ancestors. This connectedness helps develop a sense of trust.

### Sweatlodge

A sweatlodge is facilitated by a traditional/spiritual healer and should never be attempted by a novice. The most important benefit of the sweatlodge is the spiritual healing this practice generates for crime victims. It is founded on one vital concept, “nurturance can heal the spirit.” The lodge process helps an individual let go of psychological blocks and emotional experiences that may hinder their recovery from crime victimization. It is a very sacred tool. To obtain information regarding tribal traditional/spiritual healers or lodge opportunities, I encourage all victim service providers to contact the nearest tribal VOCA program.

While many individuals will understand crime (violence, abuse, or trauma) on an intellectual level, traditional Native American healing techniques give individuals the opportunity to experience healing from physical and emotional trauma in a safe environment. They teach individuals how they may begin to heal on a spiritual level.

As advocates, we must strive to offer healing opportunities to all crime victims. Respecting the diversity in victim populations may be one of our greatest challenges.

*Ruth Oja is the Victim Advocate at the Hannahville Indian Community in Wilson, Michigan.*

# MICHIGAN RESOURCE CENTER ON DOMESTIC AND SEXUAL VIOLENCE

By Jenefer O’Dell

The Michigan Resource Center on Domestic and Sexual Violence is a unique collection of materials addressing the issues of domestic and sexual violence. These materials are available for loan to individuals and organizations in Michigan working to end violence against women, as well as to members of the general public. In addition to domestic violence and sexual assault, the materials found in this unique collection address topics such as violence prevention, stalking, non-profit management, funding, the medical and legal responses to violence against women, public policy, traditionally underserved populations, and much more. The Resource Center offers the following:

- ◆ Over 3,500 books, training manuals, research reports, newsletters, professional journals and over 300 videos are available on loan by visiting or calling the Resource Center. Patrons who call the Resource Center have the option of having materials mailed to them and are responsible for the cost of mailing the materials back.
- ◆ Fax-on-demand services allow patrons to have immediate and 24-hour access to some resources. A selection of frequently requested materials and other important documents can be automatically faxed to anyone with fax capabilities. For instructions and a list of materials available via fax-on-demand call the Resource Center.
- ◆ Limited research and technical assistance on issues related to violence against women is an important service of the Resource Center. A majority of Resource Center patrons call with general questions. In response, the staff works to help identify appropriate books, videos or other materials.
- ◆ The Resource Center web page contains an online card catalog for its collection. The catalog is searchable by author, title, subject, or material type. The site also contains links to Department of Justice Reports on Violence Against Women, Fact Sheets, an Archive of Resource Center Newsletters, Michigan Domestic Violence and Sexual Assault Statutes, links to important legal and public policy resources and links to other information clearinghouses on violence against women.
- ◆ The Resource Center newsletter, *The Source*, is published quarterly. It contains reviews of new books and videos at the Resource Center and an overview of recent research and policy developments affecting those who are working to end domestic and sexual violence. Electronic versions of the newsletter are available on the web.
- ◆ Fact sheets, developed by the Resource Center’s staff, on violence against women, and the *Select Michigan Domestic Violence and Sexual Assault Statutes* are available upon request.
- ◆ Numerous handouts containing information on web resources, state and national resource centers, and over 25 specialized bibliographies of recommended resources on various topics are also available upon request.

The Michigan Resource Center on Domestic and Sexual Violence is open Monday through Friday at 3893 Okemos Road, Suite B2 in Okemos, Michigan or anytime on the web at [www.mcadsv.org/resource](http://www.mcadsv.org/resource). Please feel free to contact us with questions or requests for information, books, or videos at (517) 347-7000 or by e-mail at [resource@mcadsv.org](mailto:resource@mcadsv.org).

*Jenefer O’Dell is the Resource Center Director. The Michigan Resource Center on Domestic and Sexual Violence is a collaboration of the Michigan Domestic Violence Prevention and Treatment Board and the Michigan Coalition Against Domestic and Sexual Violence. Additional funding is provided by the U.S. Department of Health and Human Services and other generous supporters of MCADSV.*

## CRIMINAL BACKGROUND CHECKS: THE ICHAT SYSTEM

By David Bercham

The ability to quickly screen a potential employee or volunteer for a history of criminal activity is an important part of preventing added trauma to victims. Victim service agencies expend considerable resources, in terms of time and funds, interviewing and training employees and volunteers. As a result, many agencies are beginning to realize that a reliable criminal background check is an essential tool in this screening process. However, agencies have historically had problems obtaining criminal background information of potential employees and volunteers in a timely and reliable manner. In order to streamline the efforts of non-profit organizations and other companies in conducting these background checks, the Michigan State Police, through collaboration with the e-Michigan initiative, has implemented the Internet Criminal History Access Tool (ICCHAT) system.

ICCHAT is a user-friendly system that makes it possible for subscribing agencies to submit criminal background information requests over the Internet and receive instant results. In order to subscribe to the system, an agency must obtain a login name and a confidential password. The agency also must adhere to a strict policy stating that the ICHAT system can only be used for legitimate criminal background checks of potential employees and volunteers. After confirmation of the agency’s 501(c)3 status, non-profit agencies can utilize ICHAT free of charge and as often as necessary. For-profit agencies are required to pay \$5.00 per request, payable through VISA or MasterCard. Information on the ICHAT system, including instructions on how to subscribe, can be obtained by calling the Michigan State Police Criminal Justice Information System at (517) 322-1956, or by e-mail at [cjcapplhelp@state.mi.us](mailto:cjcapplhelp@state.mi.us).

*David Bercham, MSW, is a Research Associate for the Crime Victim Services Commission Technical Assistance Project at the Michigan Public Health Institute in Okemos, Michigan. Joyce Woodward of the Criminal Justice Information Center, Michigan State Police, contributed to this article.*

**Coordinating Victim Services....from page 3**

agencies. We all share the vision of having a Community Mediation Center incorporating family conferencing and victim/offender mediation for juvenile cases, as well as mediation for community disputes and for cases referred by the court. In order to make the Community Mediation Center a reality, Dial Help has collaborated with Community Mental Health, the Family Independence Agency, the courts, prosecutors’ offices, Finlandia University and the Western U.P. Mediators organization. Ultimately, the Community Mediation Center helps to meet

community need for balanced and restorative justice through case referrals.

Addressing the issues facing rural communities through community coordination and collaboration benefits victims, service providers and the community overall.

*Denise Taylor is the Victim Services Coordinator at Dial Help, Inc. in Houghton, Michigan serving Houghton, Baraga, Keweenaw and Ontonagon counties.*

**Domestic Violence Response.... from page 3**

Sergeant Dave Wood from the Michigan State Police Prevention Services Section discussed the need to understand the victim’s behavior at the scene. When talking with victims and gathering evidence, it is essential to understand that domestic violence is a traumatic event. There is no such thing as a typical victim reaction. What victims say or do may not necessarily make sense to the responding officer. Their behavior is usually their way of trying to stay safe. In doing so, it is possible that victims may unintentionally appear to be uncooperative.

**Probable Cause and Evidence Gathering**

Another aspect of domestic violence investigations is determining probable cause. This is especially crucial for cases where the victim is not present to testify against the abuser. Factors to consider when determining probable cause are statements made by the victim, assailant, children and other witnesses. The importance of listening to what victims are saying cannot be overemphasized. A case may hinge on an officer’s written record of the victim’s statements, particularly “excited utterances” made at the scene. These utterances, such as “I hurt”, represent victims’ emotional responses and are often admissible in court. Additionally, prosecutors should check 911 tapes. Often, strong audio evidence can be found in 911 records.

It is important to distinguish between offensive and defensive wounds in a domestic violence incident. Who caused which

wounds? Were there attempts at self-defense? Who was the dominant aggressor? The marks on the assailant and the victim will often indicate the dominant aggressor. Assailants often inflict harm and injuries in places that are not visible. It is common for a victim to relate a detailed account, while the assailant’s story is vague. Again, a history or pattern of abuse is more apt to point to the dominant aggressor regardless of who appears most injured from the immediate incident.

Dr. Dean Hawley provided further insights into the investigation of domestic violence incidents, including collecting evidence at the scene and documenting a crime for a successful prosecution. Dr. Hawley’s presentation illustrated different patterns of abuse, mechanisms of injury, how wounds are inflicted on the assailant and victim, injuries from strangulation, patterned injuries and how to compare injuries between parties.

It is vital to go beyond the obvious when investigating domestic violence by practicing thorough and extensive investigation techniques. If necessary, domestic violence cases can be tried without the victim’s presence. By securing essential evidence, prosecutors can better evaluate and successfully prosecute cases when victims cannot safely testify or have decided not to participate.

*Marcy Doozan is the Community Outreach Coordinator at the Underground Railroad in Saginaw, Michigan.*

**WEB RESOURCES**

**<http://www.calib.com/nccanch/>**  
National Clearinghouse on Child Abuse and Neglect Information. The Clearinghouse provides a wealth of online and print information regarding child abuse and neglect. It provides information on overall child welfare issues as well.

**<http://www.nnedv.org/>**  
National Network to End Domestic Violence. The NNEDV is a membership

organization that provides updates on public policy pertaining to domestic violence, as well as a listing of related training events and conferences.

**<http://www.nationalcasa.org/>**  
Court Appointed Special Advocate Association. The mission of the CASA, through a national network of local volunteer organizations, is to speak for the best interests of abused and neglected children in the court system.

**<http://campussafety.org/index.html>**  
Security on Campus, Inc. The mission of SOC is to educate the public about crime issues on college campuses across the nation. It also provides resources for victims of campus crimes.

**<http://fvpf.org/>**  
Family Violence Prevention Fund. The FVPF provides resources, public education, and advocacy in order to raise awareness in preventing domestic violence.

**COORDINATING VICTIM SERVICES IN A LARGE RURAL AREA**

*By Denise Taylor*

Building relationships is at the core of community coordination and collaboration for victim services. One of the benefits of working in rural areas is that it is common for involved citizens to wear many hats. With somewhat fewer people with whom to connect, building relationships can sometimes be less time-consuming than one might imagine. Nevertheless, frequent contact with key supporters and collaborators is necessary to establish and maintain these crucial relationships. By working closely with several other community agencies, law enforcement personnel, schools, civil service groups, health providers and others, Dial Help, Inc. has been able to reach out to a large, rural population over hundreds of square miles in Michigan’s Upper Peninsula.

**Collaborating for Sexual Assault Victim Services**

Community collaboration has been the foundation for the creation of a coordinated Sexual Assault Response Team/Sexual Assault Nurse Examiner (SART/SANE) Program. To establish this program, Dial Help first required the support of key community stakeholders. Our staff initiated meetings that included local hospital administrators and emergency department staff, local law enforcement, prosecutors, and volunteer advocates and nurses. The cornerstone of gaining this community support was successfully recruiting volunteer nurses and finding a facility to house the program. By the time most of the stakeholders were asked for their support, the local hospital had committed wholeheartedly to establish the SART/SANE program. Often, convincing one major player to commit creates the necessary domino effect that makes a dream become reality.

After gaining the support of these key stakeholders, subsequent stages of the process fell into place, such as determining how costs would be covered, training volunteer nurses, and coordination with law enforcement. As a result of this collaboration, victims of sexual assault are now offered free, expedient, comprehensive, and compassionate care, which could not have been accomplished without the team spirit of all involved.

**University Partnerships**

Dial Help also has ongoing working relationships with Michigan Technological University and Finlandia University to provide services to victims of sexual assault as well as educational opportunities for students. Dial Help staff have established working relationships with university faculty, administrators, and resident hall staff. These strong associations help provide numerous opportunities for on-campus presentations about victim services, sexual assault laws, date rape, and date rape drugs. Our relationship with local academic institutions has also fostered greater student involvement, particularly in getting feedback about campus crime and the underreporting of date rape. Finally, our link with local universities helps in recruiting volunteer interns who are vital to the provision of services throughout the area.

**Mediation Programs**

Presently, our community is addressing victims and offenders involved in juvenile crime. Staff members from our agency are learning Balanced and Restorative Justice principles and are beginning collaborative efforts with courts, schools, and other

**Continued on page 6**

**DOMESTIC VIOLENCE RESPONSE CONFERENCE REPORT**

*By Marcy Doozan*

**G**oing Beyond the Obvious was the theme for a recent conference on investigating domestic violence, sponsored by the Underground Railroad in Saginaw. On May 30, 2001, 115 law enforcement officers, service providers, prosecutors, educators, lawyers, probation officers and counselors came together to examine different techniques that can be used to investigate domestic violence cases. The first session focused on identifying and understanding batterer behavior and victim response, including the use of violence by crime victims, and law enforcement response. Other issues addressed were the consequences of dual arrest, a power and control analysis of domestic violence, victim behavior at the scene, developing probable cause, and a dominant aggressor analysis.

**Uncovering Patterns of Abuse**

The conference began with a definition of power and control in the context of domestic violence. Because power and control

cannot be achieved if a victim refuses to comply, the assailant typically uses abusive tactics to gain the victim’s compliance. There is an identifiable pattern to this abuse, and assailants will frequently use two or more of tactics at one time to gain power and control. Such tactics include coercion and threats, withholding money, intimidation, isolation, blaming the victim, using children to manipulate, and emotional abuse, among others.

Domestic Violence Prevention and Treatment Board trainers, Joyce Wright and Carol Hackett Garagiola, stressed the importance of law enforcement examinations of an alleged abuser’s history. Patterns of abuse can include prior assaults, death threats, suicide threats, personal protection order violations, stalking, child abuse and/or sexual abuse.

**Understanding Victim Behavior at the Scene**

The response of law enforcement is critical in establishing evidence for the prosecution of a domestic violence offense.

**Continued on page 6**